

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 573 / 2261
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Democratic Congressional Campaign Committee

A.

Full Name (Last, First, Middle Initial)

John Hall

Mailing Address 30 Rosemont Pl
Apt 5City State Zip Code
San Francisco CA 94103-6105FEC ID number of contributing
federal political committee.

C

Name of Employer
VAMC SFOccupation
Per Diem Staff RN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	0	8

Transaction ID: C5692248

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Robert Hall

Mailing Address 10 Emerald Bay

City State Zip Code
Laguna Beach CA 92651-1207FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	0	8

Transaction ID: C5726459

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

William W. Hall

Mailing Address 24 Dickerson Ct

City State Zip Code
Prt Jefferson NY 11777-1724FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	8

Transaction ID: C5720423

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

625.00

TOTAL This Period (last page this line number only)